

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Application Number	10/695,194
Filing Date	October 28, 2003
First Named Inventor	Hochstrasser et al.
Group Art Unit	1645
Examiner Name	Rodney P. Swartz
Attorney Docket Number	108140.00030

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 C.F.R. § 1.114**

- a. ☐ Previously submitted. If a final Office Action is outstanding, any amendments filed after the final Office Action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on April 19, 2006
- ii. ☐ Other _____
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure (IDS)
- iv. ☐ Other

2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
- b. ☐ Other _____

3. **Fees**

- The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.
- a. ☐ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 01-2300. A duplicate copy of this sheet is enclosed.
- i. ☒ RCE fee required under 37 C.F.R. § 1.17(e)
- ii. ☒ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
- iii. ☒ Other Any additional fees which may be due
- b. ☐ Enclosed is Check # _____ in the amount of \$ _____
- c. ☒ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Rochelle K. Seide, Ph.D.	Registration No. (Attorney/Agent)	32,300
Signature	<i>Rochelle K. Seide</i>	Date	August 22, 2006

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited through Web Enabled Patent Filing EFS addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)	Rochelle K. Seide, Ph.D.	Date	August 22, 2006
Signature	<i>Rochelle K. Seide</i>		